

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>PA</i>	45	4/2
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ± ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
1 ✓	4/20/62
2 ✓	4/20/62
3 ✓	4/20/62
4 ✓	4/20/62
5 ✓	4/20/62
6 ✓	4/20/62
7 ✓	4/20/62
8 ✓	4/20/62
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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Best Available Copy